



ARIZONA HEALTHCARE COST CONTAINMENT SYSTEM DIRECTORY

June, 2005

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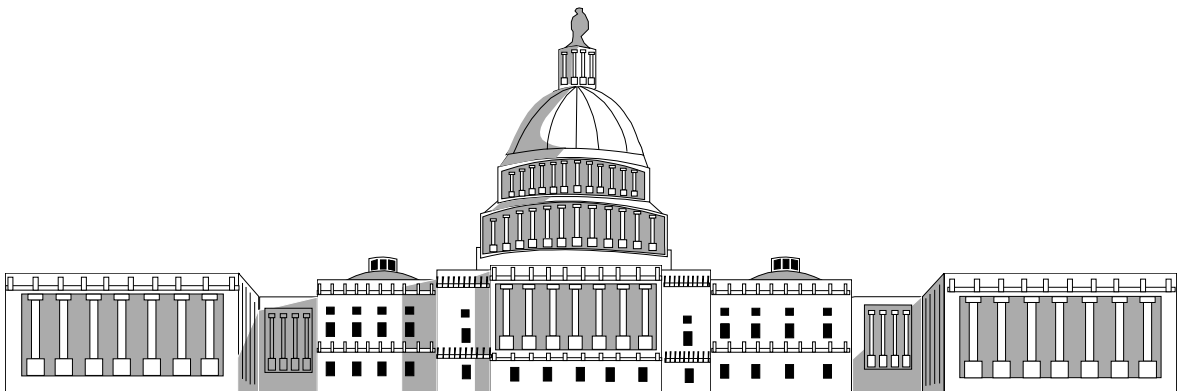
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TITLE 9. HEALTH SERVICES
CHAPTER 22. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ADMINISTRATION

The rules in this Chapter set forth standards for the AHCCCS acute care program, under the authority of A.R.S. Title 36, Chapter 29, Article 1. Specific subjects of these rules are indicated in the following table of contents.

Rule	Title	Effective Date
ARTICLE 1 – DEFINITIONS		
R9-22-101	Location of Definitions	10/12/04
R9-22-102	Scope of Services Related Definitions	05/09/02
R9-22-103	Repealed	01/08/99
R9-22-104	Reserved	N/A
R9-22-105	General Provisions and Standards Related Definitions	06/09/00
R9-22-106	Request for Proposals (RFP) Related Definitions	06/09/00
R9-22-107	Standard for Payments Related Definitions	07/15/02
R9-22-108	Repealed	04/03/04
R9-22-109	Quality Control Related Definitions	10/01/01
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R9-22-203	Repealed	09/22/97
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R9-22-205	Attending Physician, Practitioner, Primary Care Provider Services	10/12/04
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R9-22-208	Laboratory, Radiology and Medical Imaging Services	05/09/02
R9-22-209	Pharmaceutical Services	05/09/02
R9-22-210	Emergency Medical and Behavioral Health Services	05/09/02
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R9-22-502	Availability and Accessibility of Service	12/08/97
R9-22-503	Repealed	07/15/02
R9-22-504	Marketing; Prohibition against Inducements; Misrepresentations; Discrimination; Sanctions	12/08/97
R9-22-505	Approval of Advertisements and Marketing Materials	12/08/97
R9-22-506	Repealed	12/08/97
R9-22-507	Member Record	12/08/97
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R9-22-509	Transition and Coordination of Member Care	12/08/97
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R9-22-511	Fraud or Abuse	12/08/97
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R9-22-516	Renumbered	10/01/85
R9-22-517	Renumbered	10/01/85
R9-22-518	Information to Enrolled Members	12/08/97
R9-22-519	Repealed	12/08/97
R9-22-520	Expired	10/09/02
R9-22-521	Program Compliance Audits	12/08/97
R9-22-522	Quality Management/Utilization Management (QM/ UM) Requirements	12/08/97
R9-22-523	Expired	10/09/02
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TITLE 9. HEALTH SERVICES CHAPTER 27. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) HEALTH CARE FOR PRIVATE EMPLOYER GROUPS/AHCCCS ADMINISTERED <i>The rules in this Chapter set forth standards for the AHCCCS Health Care Group program, under the authority of A.R.S. Title 36, Chapter 29, Article 1. Specific subjects of these rules are indicated in the following table of contents.</i>		
Rule	Title	Effective Date
ARTICLE 1 – DEFINITIONS		
R9-27-101	Location of Definitions	05/03/05
ARTICLE 2 – SCOPE OF SERVICES		
R9-27-201	Repealed	05/03/05
R9-27-202	Covered Services	05/03/05
R9-27-203	Exclusions and Limitations	05/03/05
R9-27-204	Network Coverage of Emergency Medical Services	05/03/05
R9-27-205	Repealed	05/03/05
R9-27-206	Repealed	05/03/05
R9-27-207	Repealed	05/03/05
R9-27-208	Repealed	05/03/05
R9-27-209	Repealed	05/03/05
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R9-27-302	Eligibility and Enrollment Criteria for Employees	05/03/05
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R9-27-305	Repealed	05/03/05
R9-27-306	Repealed	05/03/05
R9-27-307	Enrollment; Effective Date of Coverage	05/03/05
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R9-27-406	Continuation Coverage	01/01/03
R9-27-407	Repealed	01/01/03
R9-27-408	Contract Compliance Sanction Alternative	01/01/03

ARTICLE 5 – GENERAL PROVISIONS AND STANDARDS		
R9-27-501	Availability and Accessibility of Services	08/07/00
R9-27-502	Repealed	01/01/03
R9-27-503	Marketing and Discrimination	01/01/03
R9-27-504	Approval of Advertisements and Marketing Material	08/07/00
R9-27-505	Member Records and Systems	08/07/00
R9-27-506	Fraud or Abuse	01/01/03
R9-27-507	Release of Safeguarded Information	01/01/03
R9-27-508	Repealed	07/15/97
R9-27-509	Information to Enrolled Members	08/07/00
R9-27-510	Discrimination Prohibition	01/01/03
R9-27-511	Equal Opportunity	08/07/00
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R9-27-702	Prohibition Against Charges to Members	01/01/03
R9-27-703	Payments by HCG Plans	08/07/00
R9-27-704	HCG Plan's Liability to Noncontracting Hospitals for the Provision of Emergency and Subsequent Care to Enrolled Members	01/01/03
R9-27-705	Copayments	08/07/00
R9-27-706	Payments by Employer Groups	01/01/03
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TITLE 9. HEALTH SERVICES
CHAPTER 28. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ARIZONA LONG-TERM CARE SYSTEM

The rules in this Chapter set forth standards for the AHCCCS Long Term Care program, under the authority of A.R.S. Title 36, Chapter 29, Article 2. Specific subjects of these rules are indicated in the following table of contents.

Rule	Title	Effective Date
ARTICLE 1 – DEFINITIONS		
R9-28-101	General Definitions	05/01/04
R9-28-102	Covered Services Related Definitions	10/04/03
R9-28-103	Pre-admission Screening Related Definitions	05/01/04
R9-28-104	Eligibility and Enrollment Related Definitions	06/09/00
R9-28-105	Program Contractor and Provider Standards Related Definitions	02/08/00
R9-28-106	Request for Proposals and Contract Process Related Definitions	02/08/00
R9-28-107	Standards for Payments Related Definitions	10/04/03
R9-28-108	Repealed	04/03/04
R9-28-109	Repealed	05/01/04
R9-28-110	Reserved	N/A
R9-28-111	Behavioral Health Services Related Definitions	12/13/99
ARTICLE 2 – COVERED SERVICES		
R9-28-201	General Requirements	05/09/02
R9-28-202	Medical Services	05/09/02
R9-28-203	Repealed	09/22/97
R9-28-204	Institutional Services	05/09/02
R9-28-205	Home and Community Based Services (HCBS)	05/09/02
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R9-28-302	General Provisions	12/07/01
R9-28-303	Pre-admission Screening (PAS) Process	12/07/01
R9-28-304	Pre-admission Screening Criteria for an Applicant or Member who is Elderly and Physically Disabled (EPD)	12/07/01
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R9-28-402	Categorical Requirements and Coverage Groups	10/01/01
R9-28-403	State Residency	01/06/99
R9-28-404	Citizenship and Qualified Alien Status	01/06/99
R9-28-405	Social Security Enumeration	01/06/99
R9-28-406	ALTCS Living Arrangements	10/01/01
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R9-28-408	Income Criteria for Eligibility	10/01/01
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R9-28-415	Enrollment with a Tribal Program Contractor	02/08/00
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R9-28-417	Notification Requirements	02/08/00
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R9-28-502	Long-term Care Provider Requirements	12/08/97
R9-28-503	Licensure and Certification for Long-term Care Institutional Facilities	12/08/97
R9-28-504	Standards of Participation, Licensure, and Certification for HCBS Providers	03/04/99
R9-28-505	Standards, Licensure, and Certification for Providers of Hospital and Medical Services	12/8/97
R9-28-506	Reserved	N/A
R9-28-507	Program Contractor General Requirements	02/08/00
R9-28-508	Repealed	02/08/00
R9-28-509	Reserved	N/A
R9-28-510	Case Management	12/08/97
R9-28-511	Quality Management/Utilization Management (QM/UM) Requirements	03/04/99
R9-28-512	Expired	10/09/02
R9-28-513	Program Compliance Audits	12/08/97
R9-28-514	Release of Safeguarded Information by the Administration and Contractors	12/08/97
R9-28-515	Discrimination Prohibition and Equal Opportunity	09/01/88
ARTICLE 6 – RFP AND CONTRACT PROCESS		
R9-28-601	General Provision	01/10/02
R9-28-602	RFP	01/10/02
R9-28-603	Contract Award	01/10/02
R9-28-604	Contract or Proposal Protests; Appeals	01/10/02
R9-28-605	Waivers of Contractor's Subcontract with Hospitals	01/10/02
R9-28-606	Contract Compliance Sanction	01/10/02
R9-28-607	Repealed	01/10/02
R9-28-608	Repealed	01/10/02
R9-28-609	Repealed	02/08/00
R9-28-610	Repealed	02/08/00

ARTICLE 7 – STANDARDS FOR PAYMENTS		
R9-28-701	Scope of the Administration’s Liability	01/10/02
R9-28-702	Prohibition Against Charges to Member	07/15/02
R9-28-703	Claims	07/15/02
R9-28-704	Transfer of Payments	07/15/02
R9-28-705	Payments by Program Contractors	03/04/99
R9-28-706	Payments by Administration for Services Provided to an Eligible Person	01/02/05
R9-28-707	Contractor’s Liability to Hospitals for the Provision of Emergency and Subsequent Care	01/10/02
R9-28-708	Capped Fee-for-Service Payment	11/05/93
R9-28-709	Reinsurance	07/15/02
R9-28-710	Repealed	01/10/02
R9-28-711	Payments Made on Behalf of a Program Contractor; Recovery of Funds; Postpayment Reviews	07/15/02
R9-28-712	County of Fiscal Responsibility	07/15/02
R9-28-713	Hospital Rate Negotiations	02/08/00
R9-28-714	Payment to Providers	01/10/02
R9-28-715	Specialty Contracts	01/10/02
ARTICLE 8 – REPEALED		
ARTICLE 9 – FIRST- AND THIRD- PARTY LIABILITY AND RECOVERIES		
R9-28-901	Definitions	09/11/04
R9-28-902	General Provisions	05/01/04
R9-28-903	Cost Avoidance	05/01/04
R9-28-904	Member Participation	05/01/04
R9-28-905	Collections	05/01/04
R9-28-906	AHCCCS Monitoring Responsibilities	05/01/04
R9-28-907	Notification for Perfection, Recording, and Assignment of AHCCCS Liens	05/01/04
R9-28-908	Notification Information for Liens	05/01/04
R9-28-909	Notification of Health Insurance Information	05/01/04
R9-28-910	Recoveries	05/01/04
R9-28-911	Estate Recovery and Undue Hardship	09/11/04
R9-28-912	Partial Recovery	05/01/04
R9-28-913	TEFRA Liens - General	09/11/04
R9-28-914	TEFRA Liens - Affected Members	09/11/04
R9-28-915	TEFRA Liens - Prohibitions	09/11/04
R9-28-916	TEFRA Liens - AHCCCS Notice of Intent	09/11/04
R9-28-917	TEFRA Liens and Estate Recovery -Member's Request for a State Fair Hearing	09/11/04
R9-28-918	TEFRA Liens - Recovery	09/11/04
R9-28-919	TEFRA Liens - Release	09/11/04
ARTICLE 10 – CIVIL MONETARY PENALTIES AND ASSESSMENTS		
R9-28-1001	Basis for Civil Monetary Penalties and Assessments for Fraudulent Claims	09/11/04
R9-28-1002	Repealed	06/09/98

R9-28-1003	Repealed	06/09/98
R9-28-1004	Repealed	06/09/98
ARTICLE 11 – BEHAVIORAL HEALTH SERVICES		
R9-28-1101	General Requirements	10/01/01
R9-28-1102	Contractor Responsibilities	12/13/99
R9-28-1103	Eligibility for Covered Services	10/01/01
R9-28-1104	General Service Requirements	10/01/01
R9-28-1105	Scope of Behavioral Health Services	02/12/02
R9-28-1106	General Provisions and Standards for Service Providers	10/01/01
R9-28-1107	Standards for Payments	12/13/99
R9-28-1108	Grievance and Request for Hearing Process	08/07/00
ARTICLE 12 –REPEALED		
ARTICLE 13 – FREEDOM TO WORK		
R9-28-1301	General Freedom to Work Requirements	01/01/03
R9-28-1302	General Administration Requirements	01/01/03
R9-28-1303	Application for Coverage	01/03/04
R9-28-1304	Notice of Approval or Denial	01/01/03
R9-28-1305	Reporting and Verifying Changes	01/01/03
R9-28-1306	Actions that Result From a Redetermination or Change	01/01/03
R9-28-1307	Notice of Adverse Action Requirements	01/01/03
R9-28-1308	Request for Hearing	01/01/03
R9-28-1309	Social Security Number	01/01/03
R9-28-1310	State Residency	01/01/03
R9-28-1311	Citizenship and Immigrant Status	01/01/03
R9-28-1312	Age	01/01/03
R9-28-1313	Premium	01/01/03
R9-28-1314	Income	01/01/03
R9-28-1315	Living Arrangement	01/01/03
R9-28-1316	Institutionalized Person	01/01/03
R9-28-1317	Medical Eligibility	01/01/03
R9-28-1318	Non Payment of Premium	01/01/03
R9-28-1319	Applicant and Member Responsibility	01/01/03
R9-28-1320	Additional Eligibility Criteria for the Basic Coverage Group	01/01/03
R9-28-1321	Share of Cost	01/01/03
R9-28-1322	Premium Amount	01/01/03
R9-28-1323	Enrollment	01/01/03
R9-28-1324	Redetermination of Eligibility	01/01/03

TITLE 9. HEALTH SERVICES CHAPTER 29. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) QUALIFIED MEDICARE BENEFICIARY (QMB) <i>The rules in this Chapter set forth standards for the AHCCCS QMB program, under the authority of A.R.S. Title 36, Chapter 29, Article 3.. Specific subjects of these rules are indicated in the following table of contents.</i>		
Rule	Title	Effective Date
ARTICLE 1 – DEFINITIONS		
R9-29-101	Location of Definitions	01/03/04
R9-29-102	Dually Eligible	01/03/04
ARTICLE 2 – ELIGIBILITY		
R9-29-201	General	01/03/04
R9-29-202	Opportunity to Apply	01/03/04
R9-29-203	How to File an Application	01/03/04
R9-29-204	Date of Application	01/03/04
R9-29-205	Complete Application	01/03/04
R9-29-206	Assistance with Application	01/03/04
R9-29-207	Assignment of Rights	01/03/04
R9-29-208	Medical Support Obligation	01/03/04
R9-29-209	Social Security Number (SSN)	01/03/04
R9-29-210	Citizenship	01/03/04
R9-29-211	Residency	01/03/04
R9-29-212	Income Calculations	01/03/04
R9-29-213	Income Standards	01/03/04
R9-29-214	Application for Other Benefits	01/03/04
R9-29-215	Institutionalized Person	01/03/04
R9-29-216	Resources	01/03/04
R9-29-217	Verification	01/03/04
R9-29-218	Medicare Requirements	01/03/04
R9-29-219	Eligibility Determination	01/03/04
R9-29-220	Notice of Eligibility Determination	01/03/04
R9-29-221	Effective Date of Eligibility	01/03/04
R9-29-222	Discontinuance	01/03/04
R9-29-223	Redetermination	01/03/04
R9-29-224	Reporting Changes	01/03/04
ARTICLE 3 – COVERED BENEFITS AND SERVICES		
R9-29-301	QMB Only	01/03/04
R9-29-302	Dually Eligible Member	01/03/04
R9-29-303	SLMB and QI-1	01/03/04
ARTICLE 4 – CONTRACTOR, PROVIDER , NON-PROVIDER, AND NON-CONTRACTING PROVIDER REQUIREMENTS		
R9-29-401	Contractor, Provider, Nonprovider, and Noncontracting Provider Requirements	01/03/04
R9-29-402	Repealed	04/14/98
R9-29-403	Repealed	04/14/98
R9-29-404	Repealed	04/14/98

ARTICLE 5 – GRIEVANCE AND REQUEST FOR HEARING		
R9-29-501	General Provisions for a Grievance and a Request for Hearing	01/03/04
R9-29-502	Repealed	01/03/04
R9-29-503	Eligibility Hearing for an Applicant or a Member	01/03/04
R9-29-504	Repealed	04/14/98
ARTICLE 6 – FIRST- AND THIRD –PARTY LIABILITY AND COORDINATION OF BENEFITS		
R9-29-601	First and Third- party Liability and Recoveries	01/03/04
R9-29-602	Repealed	01/03/04

TITLE 9. HEALTH SERVICES
CHAPTER 31. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
CHILDREN'S HEALTH INSURANCE PROGRAM

The rules in this Chapter set forth standards for the AHCCCS Children's Health Insurance program, under the authority of A.R.S. Title 36, Chapter 29, Article 4. Specific subjects of these rules are indicated in the following table of contents.

ARTICLE 1 – DEFINITIONS

R9-31-101	Location of Definitions	01/31/03
R9-31-102	Scope of Services Related Definitions	10/23/98
R9-31-103	Eligibility and Enrollment Related Definitions	12/07/01
R9-31-104	Reserved	N/A
R9-31-105	General Provisions and Standards	10/23/98
R9-31-106	Request for Proposal (RFP) Related Definitions	09/10/99
R9-31-107	Standards for Payments Related Definitions	07/15/02
R9-31-108	Repealed	04/03/04
R9-31-109	Reserved	N/A
R9-31-110	Repealed	05/01/04
R9-31-111	Reserved	N/A
R9-31-112	Covered Behavioral Health Services Related Definitions	10/01/01
R9-31-113	Repealed	08/04/00
R9-31-114	Reserved	N/A
R9-31-115	Reserved	N/A
R9-31-116	Services for Native Americans Related Definitions	07/15/02

ARTICLE 2 – SCOPE OF SERVICES

R9-31-201	General Requirements	05/09/02
R9-31-202	Reserved	N/A
R9-31-203	Reserved	N/A
R9-31-204	Inpatient General Hospital Services	05/09/02
R9-31-205	Attending Physician, Practitioner, and Primary Care Provider Services	05/09/02
R9-31-206	Organ and Tissue Transplantation Services	10/23/98
R9-31-207	Dental Services	05/09/02
R9-31-208	Laboratory, Radiology, and Medical Imaging Services	05/09/02
R9-31-209	Pharmaceutical Services	05/09/02
R9-31-210	Emergency Medical Services	10/01/01
R9-31-211	Transportation Services	12/07/01
R9-31-212	Medical Supplies, Durable Medical Equipment, and Orthotic and Prosthetic Devices	05/09/02
R9-31-213	Health Risk Assessment and Screening Services	12/07/01
R9-31-214	Reserved	N/A
R9-31-215	Other Medical Professional Services	05/09/02
R9-31-216	NF, Alternative HCBS Setting, or HCBS	05/09/02

ARTICLE 3 – ELIGIBILITY AND ENROLLMENT

R9-31-301	General Requirements	01/01/03
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R9-31-302	Applications	01/03/04
R9-31-303	Eligibility Criteria	01/03/04
R9-31-304	Income Eligibility	01/03/04
R9-31-305	Verification	10/23/98
R9-31-306	Enrollment	12/07/01
R9-31-307	Guaranteed Enrollment	10/01/03
R9-31-308	Changed and Redeterminations	12/07/01
R9-31-309	Newborn Eligibility	09/10/99
R9-31-310	Notice Requirements	12/07/01
ARTICLE 4 – REPEALED		
ARTICLE 5 – GENERAL PROVISIONS AND STANDARDS		
R9-31-501	General Provisions	10/23/98
R9-31-502	Availability and Accessibility of Service	09/10/99
R9-31-503	Repealed	07/15/02
R9-31-504	Marketing; Prohibition against Inducements; Misrepresentations; Discrimination; Sanctions	12/07/01
R9-31-505	Approval of Advertisements and Marketing Materials	10/23/98
R9-31-506	Reserved	N/A
R9-31-507	Member Record	12/07/01
R9-31-508	Limitation of Benefit Coverage for Illness or Injury due to Catastrophe	10/23/98
R9-31-509	Transition and Coordination of Member Care	12/07/01
R9-31-510	Transfer of Members	10/23/98
R9-31-511	Fraud or Abuse	12/07/01
R9-31-512	Release of Safeguarded Information by the Administration and Contractors	10/23/98
R9-31-513	Discrimination Prohibition	12/07/01
R9-31-514	Equal Opportunity	10/23/98
R9-31-515	Reserved	N/A
R9-31-516	Reserved	N/A
R9-31-517	Reserved	N/A
R9-31-518	Information to Enrolled Members	10/23/98
R9-31-519	Reserved	N/A
R9-31-520	Financial Statements, Periodic Reports, and Information	10/23/98
R9-31-521	Program Compliance Audits	12/07/01
R9-31-522	Quality Management/Utilization Management (QM/UM) Requirements	10/23/98
R9-31-523	Financial Resources	10/23/98
R9-31-524	Continuity of Care	10/23/98
R9-31-525	Reserved	N/A
R9-31-526	Reserved	N/A
R9-31-527	Reserved	N/A
R9-31-528	Reserved	N/A
R9-31-529	Reserved	N/A
ARTICLE 6 – REQUEST FOR PROPOSALS (RFP)		
R9-31-601	General Provisions	01/10/02
R9-31-602	RFP	01/10/02
R9-31-603	Contract Award	01/10/02

R9-31-604	Contract or Proposal Protests; Appeals	01/10/02
R9-31-605	Waiver of Contractor's Subcontract with Hospitals	01/10/02
R9-31-606	Contract Compliance Sanction	01/10/02
ARTICLE 7 – STANDARDS FOR PAYMENTS		
R9-31-701	Scope of the Administration's Liability	01/10/02
R9-31-702	Prohibitions Against Charges to Members	07/15/02
R9-31-703	Claims	07/15/02
R9-31-704	Transfer of Payments	07/15/02
R9-31-705	Payments by Contractors	09/10/99
R9-31-706	Reserved	N/A
R9-31-707	Payments for Newborns	10/23/98
R9-31-708	Reserved	N/A
R9-31-709	Contractor's Liability to Hospitals for the Provision of Emergency and Subsequent Care	01/10/02
R9-31-710	Reserved	N/A
R9-31-711	Copayments	10/01/03
R9-31-712	Reserved	N/A
R9-31-713	Payments Made on Behalf of a Contractor; Recovery of Indebtedness	07/15/02
R9-31-714	Payments to Providers	01/10/02
R9-31-715	Hospital Rate Negotiations	10/23/98
R9-31-716	Specialty Contracts	01/10/02
R9-31-717	Hospital Claims Review	09/10/99
R9-31-718	Contractor Performance Measure Outcomes	01/10/02
R9-31-719	Reinsurance	07/15/02
ARTICLE 8 – REPEALED		
ARTICLE 9 – QUALITY CONTROL		
R9-31-901	General Provisions	10/23/98
ARTICLE 10 – FIRST- AND THIRD-PARTY LIABILITY AND RECOVERIES		
R9-31-1001	Definitions	05/01/04
R9-31-1002	General Provisions	05/01/04
R9-31-1003	Cost Avoidance	05/01/04
R9-31-1004	Member Participation	05/01/04
R9-31-1005	Collections	05/01/04
R9-31-1006	AHCCCS Monitoring Responsibilities	05/01/04
R9-31-1007	Notification for Perfection, Recording, and Assignment of Title XXI liens	05/01/04
R9-31-1008	Notification Information for Liens	05/01/04
R9-31-1009	Notification of Health Insurance Information	05/01/04
ARTICLE 11 – CIVIL MONETARY PENALTIES AND ASSESSMENTS		
R9-31-1101	Basis for Civil Monetary Penalty and Assessments for Fraudulent Claims	09/11/04
R9-31-1102	Repealed	09/11/04
R9-31-1103	Repealed	09/11/04

R9-31-1104	Repealed	09/11/04

ARTICLE 12 – BEHAVIORAL HEALTH SERVICES		
R9-31-1201	General Requirements	10/01/01
R9-31-1202	ADHS and Contractor Responsibilities	10/01/01
R9-31-1203	Eligibility for Covered Services	10/01/01
R9-31-1204	General Service Requirements	10/01/01
R9-31-1205	Scope of Behavioral Health Services	12/07/01
R9-31-1206	General Provisions and Standards for Service Providers	10/01/01
R9-31-1207	Standards for Payments	12/07/01
R9-31-1208	Grievance and Request for Hearings Process	08/04/00
ARTICLE 13 – REPEALED		
ARTICLE 14 – PREMIUMS		
R9-31-1401	Purpose	01/01/05
R9-31-1402	Premium Amount for a Member Who is a Child Determined Eligible under Article 3 of this Chapter	01/01/05
R9-31-1403	Repealed	01/01/03
R9-31-1404	Hardship Exemption for a Member Who is a Child Determined Eligible under Article 3 of this Chapter	01/01/05
R9-31-1405	Repealed	01/01/03
R9-31-1406	Repealed	01/01/03
R9-31-1407	Repealed	01/01/03
R9-31-1408	Premium Amount for a Member who is a Parent Determined Eligible under Article 17 of this Chapter	01/01/05
R9-31-1409	Payment Due Date for Current Month	01/01/05
R9-31-1410	Payment Received Date	01/01/03
R9-31-1411	Past Due Payment	01/01/05
R9-31-1412	Payment Type	01/01/05
R9-31-1413	Returned Check	01/01/03
R9-31-1414	Payment in Advance	01/01/03
R9-31-1415	Reimbursement of a Premium	01/01/05
R9-31-1416	Allocation of Payment for an Eligible Member	01/01/03
R9-31-1417	Change in Premium Amount	01/01/05
R9-31-1418	Discontinuance for Failure to Pay Premium	01/01/05
R9-31-1419	Premium Payment During the Appeal and Request for Hearing Process	01/01/05
R9-31-1420	Payment of a Premium	01/01/05
ARTICLE 15 – RESERVED		

ARTICLE 16 – SERVICES FOR NATIVE AMERICANS		
R9-31-1601	General Requirements	12/07/01
R9-31-1602	General Requirements for Scope of Services	12/07/01

R9-31-1603	Inpatient General Hospital Services	05/09/02
R9-31-1604	Physician and Primary Care Physician and Practitioner Services	10/23/98
R9-31-1605	Organ and Tissue Transplantation Services	10/23/98
R9-31-1606	Dental Services	10/23/98
R9-31-1607	Laboratory, Radiology, and Medical Imaging Services	10/23/98
R9-31-1608	Pharmaceutical Services	05/09/02
R9-31-1609	Emergency Services	10/23/98
R9-31-1610	Transportation Services	12/07/01
R9-31-1611	Medical Supplies, Durable Medical Equipment, and Orthotic and Prosthetic Devices	05/09/02
R9-31-1612	Health Risk Assessment and Screening Services	05/09/02
R9-31-1613	Other Medical Professional Services	05/09/02
R9-31-1614	NF, Alternative HCBS Setting or HCBS	05/09/02
R9-31-1615	Eligibility and Enrollment	10/23/98
R9-31-1616	Standards for Payments	01/02/05
R9-31-1617	Prior Authorization	05/09/02
R9-31-1618	Claims Submission to the Administration	07/15/02
R9-31-1619	Hospital Claims Review	10/23/98
R9-31-1620	Prohibitions Against Charges to Members	07/15/02
R9-31-1621	Transfer of Payments	07/15/02
R9-31-1622	The Administration's Liability to Hospitals for the Provision of Emergency and Subsequent Care	12/07/01
R9-31-1623	Repealed	07/15/02
R9-31-1624	Specialty Contracts	10/23/98
R9-31-1625	Behavioral Health Services	12/07/01
ARTICLE 17 – ELIGIBILITY AND ENROLLMENT FOR A PARENT		
R9-31-1701	General	01/01/05
R9-31-1702	Application	01/03/04
R9-31-1703	Parent Eligibility Criteria	01/01/03
R9-31-1704	Income	01/01/05
R9-31-1705	Citizenship	01/01/03
R9-31-1706	Residency	01/01/03
R9-31-1707	Social Security Number (SSN)	01/01/03
R9-31-1708	Age	01/01/03
R9-31-1709	Ineligibility for Title XIX	01/01/03
R9-31-1710	Institutionalized Person	01/01/03
R9-31-1711	Other Health Coverage	01/01/03
R9-31-1712	State Health Benefits	01/01/03
R9-31-1713	Prior Health Insurance Coverage	01/01/03
R9-31-1714	Repealed	01/01/05
R9-31-1715	Repealed	01/01/03
R9-31-1716	Verification	01/01/03
R9-31-1717	Assignment of Rights	01/01/03
R9-31-1718	Approval and Effective Date of Eligibility	01/01/03
R9-31-1719	Enrollment	01/01/05
R9-31-1720	Change and Redetermination	01/01/03
R9-31-1721	Denial of Eligibility	01/01/05
R9-31-1722	Discontinuance of Eligibility and Notice Requirements	01/01/05
R9-31-1723	Newborn Eligibility	01/01/03
R9-31-1724	Premium and Enrollment Fee	01/01/05

R9-31-1725	Appeal and Request for Hearing Process	01/01/05
R9-31-1726	Payment of Outstanding Premium and Enrollment Fees	01/01/05
R9-31-1727	Payment Due Date for Current Month	01/01/05
R9-31-1728	Payment Received Date	01/01/05
R9-31-1729	Past Due Payment	01/01/05
R9-31-1730	Payment Type	01/01/05
R9-31-1731	Returned Check	01/01/05
R9-31-1732	Payment in Advance	01/01/05
R9-31-1733	Reimbursement of a Premium	01/01/05
R9-31-1734	Allocation of Payment for an Eligible Member	01/01/05
R9-31-1735	Change in Premium Amount	01/01/05

TITLE 9. HEALTH SERVICES
CHAPTER 34. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
GRIEVANCE SYSTEM

The rules in this Chapter set forth standards for the AHCCCS Grievance System, under the authority of A.R.S. Title 36, Chapter 29, Article 4. Specific subjects of these rules are indicated in the following table of contents.

ARTICLE 1 – REQUEST FOR ELIGIBILITY HEARING

R9-34-101	Purpose	04/03/04
R9-34-102	Definitions	04/03/04
R9-34-103	Computation of Time	04/03/04
R9-34-104	Petitioner's Rights	04/03/04
R9-34-105	Who May File	04/03/04
R9-34-106	Requesting a State Fair Hearing	04/03/04
R9-34-107	Time-Frame for Requesting a State Fair Hearing	04/03/04
R9-34-108	Format and Contents of the Request for a State Fair Hearing	04/03/04
R9-34-109	Notice of Hearing	04/03/04
R9-34-110	Denial of a Request for a State Fair Hearing	04/03/04
R9-34-111	AHCCCS Time-frame for Resolution of a State Fair Hearing	04/03/04
R9-34-112	Withdrawal of a Request for a State Fair Hearing	04/03/04
R9-34-113	Motion for Rehearing or Review	04/03/04
R9-34-114	AHCCCS Coverage During the State Fair Hearing Process	04/03/04

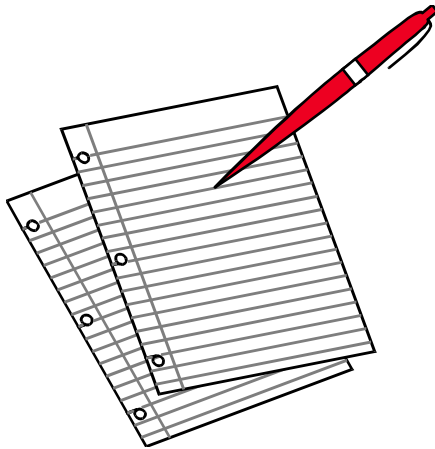
ARTICLE 2 – APPEAL, GRIEVANCE, AND HEARING FOR AN ENROLLED PERSON

R9-34-201	Purpose	04/03/04
R9-34-202	Definitions	04/03/04
R9-34-203	Computation of Time	04/03/04
R9-34-204	Language and Format of the Notice of Action	04/03/04
R9-34-205	Content of the Notice of Action	04/03/04
R9-34-206	Contractor Notice of Action Time-frame for Service Authorization Requests	04/03/04
R9-34-207	Contractor Notice of Action Time-frame for Service Termination, Suspension, or Reduction	04/03/04
R9-34-208	Who May File	04/03/04
R9-34-209	Enrollee Time-frame for Filing an Appeal or Grievance with the Contractor	04/03/04
R9-34-210	Contractor General Requirements for Grievance or Appeal Process	04/03/04
R9-34-211	Contractor Special Requirements for the Appeal Process	04/03/04
R9-34-212	Contractor Time-frame for Standard Disposition of a Grievance	04/03/04
R9-34-213	Contractor Time-frame for an Expedited Resolution of an Appeal	04/03/04
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**Copies of these rules may be obtained from the
Office of the Secretary of State in accordance
with their fee schedule by calling (602) 542-4086.**

Incorporations By Reference



TITLE 9. HEALTH SERVICES
CHAPTER 22. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ADMINISTRATION

Description	Title	Rule
42 CFR 455.101	September 30, 1986	R9-22-106
42 CFR 418.202	December 20, 1994	R9-22-213(A)(8)(b)
42 CFR 441 Subpart B	January 29, 1985	R9-22-213(B)(2)
1634 Agreement between State of Arizona and DHHS	October 1, 1982	R9-22-512(F)(5)
42 CFR 431.107(b)	April 6, 1992	R9-22-703(A)
42 CFR 447.45	February 15, 1990	R9-22-703(C)(2)
42 U.S.C. 1396u-2	August 5, 1997	R9-22-705(B)2
42 CFR 447.205	December 19, 1983	R9-22-710(B)
42 CFR 447.331 through 447.332	July 31, 1987	R9-22-710(B)(2)
42 USC 300gg(c)	January 5, 1999	R9-22-2003(A)(5)

TITLE 9. HEALTH SERVICES
CHAPTER 27. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) HEALTH
CARE FOR PRIVATE EMPLOYER GROUPS/AHCCCS ADMINISTERED

None.

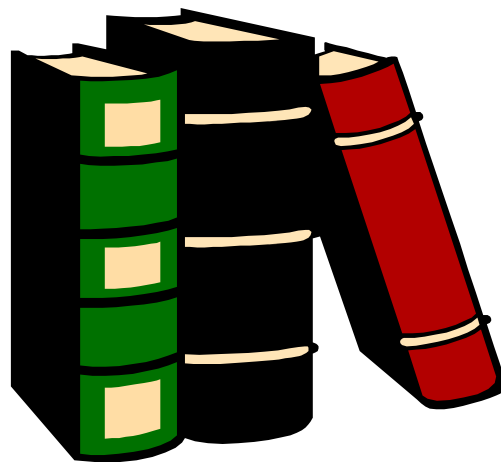
TITLE 9. HEALTH SERVICES
CHAPTER 28. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) ARIZONA
LONG-TERM CARE SYSTEM

42 CFR 441.151	May 22, 2001	R9-28-204(D)(5)
42 CFR 483 Subpart I	February 28, 1992	R9-28-204(D)(2)
42 CFR Part 418.202	December 20, 1994	R9-28-206(4)(b)
42 CFR 435.403	December 21, 1990	R9-28-403
In Section 2 of the AFDC State Plan as it existed on July 16, 1996	January 06, 1999	R9-28-402(A)(6)
42 U.S.C. 1396p(c)(1)(A)	August 10, 1993	R9-28-409(A)
42 U.S.C. 1396p(c)(1)(B)	August 10, 1993	R9-28-409(B)
42 U.S.C. 1396p(c)(2)	August 10, 1993	R9-28-409(C)
42 U.S.C. 1396p(c)(1)(C)	August 10, 1993	R9-28-409(D)
42 U.S.C. 1396p(c)(2)(C)	August 10, 1993	R9-28-409(G)(1)
42 U.S.C. 1396r-5(c)(1)	September 30, 1989	R9-28-410(B)(1)(a)
42 U.S.C. 1396r-5(f)(2)	September 30, 1989	R9-28-410(B)(1)(b)
42 U.S.C. 1396r-5(c)(2)	September 30, 1989	R9-28-410(B)(1)(c)
42 U.S.C. 1396r-5(b)(2)	October 1, 1993	R9-28-410(C)(1)
42 U.S.C. 1396r-5(d)(1) and (2)	September 30, 1989	R9-28-410(C)(4)
42 U.S.C. 1396r-5(f)	September 30, 1989	R9-28-410(D)(1)
42 CFR 442	September 28, 1995	R9-28-503(A)
42 CFR 483	September 29, 1995	R9-28-503(A)
42 CFR 442, Subpart C	November 20, 1992	R9-28-503(B)
42 CFR 483	September 29, 1995	R9-28-503(B)
42 CFR 482	September 9, 1996	R9-28-505(B)
42 CFR 456(C)	September 29, 1978	R9-28-505(B)
42 CFR 456 Subparts C, D, and F	December 1, 1986	R9-28-511(2)
42 USC 1396r	August 5, 1997	R9-28-606(B)

42 CFR 488, Subpart F	May 17, 1999	R9-28-606(B)
42 CFR 447.205	January 18, 1984	R9-28-708(B)
42 CFR 447. 331 through 447.332	October 29, 1987	R9-28-708(B)(4)
TITLE 9. HEALTH SERVICES		
CHAPTER 29. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) QUALIFIED MEDICARE BENEFICIARY (QMB)		
None.		
TITLE 9. HEALTH SERVICES		
CHAPTER 31. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) PREMIUM SHARING DEMONSTRATION PROJECT		
42 CFR 441, Subpart B	January 29, 1985	R9-31-213(B)(2)
20 CFR 416, Appendix to K	June 6, 1997	R9-31-304(D)(1)
42 U.S.C. 1397	August 5, 1997	R9-31-501(B)
42 CFR 455, Subpart B	September 30, 1986	R9-31-520(B)(4)
42 U.S.C. 1396u-2	August 5, 1997	R9-31-705(B)(2)
42 CFR 441, Subpart B	January 29, 1985	R9-31-1612(B)(2)
42 CFR 447.45	February 15, 1990	R9-31-1618(B)(2)
TITLE 9. HEALTH SERVICES		
CHAPTER 34. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) GRIEVANCE SYSTEM		
None.		

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Substantive Policy Statements



Manual	Responsible Individual
<p>AHCCCS Eligibility Policy Manual</p> <p>This manual sets forth policies and procedures for the AHCCCS Freedom to Work, Arizona Long Term Care System, Breast and Cervical Cancer Treatment Program, Medicare Cost Sharing Program, and the Supplemental Security Income Medical Assistance Only (SSI-MAO). This manual provides an overview of all health insurance programs of the Arizona Healthcare Cost Containment System (AHCCCS).</p>	<p>Nancy Noto AHCCCS Administration, DMS 801 East Jefferson, MD 2600 Phoenix, Arizona 85034 Telephone: (602) 417-4512</p>
<p>KidsCare Manual</p> <p>This manual sets forth policies and procedures for determining eligibility for the AHCCCS KidsCare program.</p>	<p>Nancy Noto AHCCCS Administration, DMS 801 East Jefferson, MD 2600 Phoenix, Arizona 85034 Telephone: (602) 417-4512</p>